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APPLICANTS

Tim The Nguyen, Oxnard, CA;

\*\* CONTINUING DATA \*\*\*\*\* None, *dr*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* None, *dr*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
\*\* 02/12/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Initials	STATE OR  COUNTRY CA	SHEETS  DRAWING 11	TOTAL  CLAIMS 10 11	INDEPENDENT  CLAIMS 3
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ADDRESS  
24936  
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TITLE  
CUSTOMIZED ORTHOPEDIC SOLE-INSERT AND METHOD FOR MAKING

FILING FEE  RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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